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ork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Under the P **CHANGE OF** 10/800,221 Application Number **CORRESPONDENCE ADDRESS** 03/11/2004 Filing Date **Application** First Named Inventor Peter John McElheny 2812 Art Unit Lindsday, Jr., Walter Lee **Examiner Name** 

Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450. Attorney Docket Number 060889-5002 Please change the Correspondence Address for the above-identified patent application to: 48591 V Customer Number: OR Firm or Individual Name Morgan Lewis & Bockius, LLP 1111 Pennsylvania Avenue, NW Address **Address** Zip State D.C. 20004 City Washington Country 202.739.3000 Fax 202.739.3001 **Telephone** This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Г Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). V Attorney or Agent of record. Registration Number 24,615. Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number\_ Typed or Printed Name Francis E. Morris Signature Telephone (212) 309-6632 Date June 6, 2005 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below \*. \*Total of forms are submitted.

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